

## Floring CRE M 102: Campaign Finance Report ELECTION COMMISS Municipal Form Office of Campaign and Political Finance

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2006- JAN 23 A 10: 53

City or Town Clerk or Election Commission

Please print or	type all	information,	except	signatures.
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Trease print of type air information, except signatures.
Fill in dates:  Reporting Period Beginning October 14 2005 Ending Necember 31 2005
Type of report: (Check one)  8th day preceding preliminary 8th day preceding election 30 day after election vear-end report dissolution
Full Name of Candidate (if applicable)  SCHOOL COMMITTEE, Cambridge  Office Sought and District  Olivo  SENSTS ST. W. Cambridge, MA  Residential Address  617 491-1809  Tel. No. (optional)  Friends Of Luc Schuster  Committee Name  Max McMahon  Name of Committee Treasurer  SENSTS ST. W. Cambridge, MA O2140  Committee Mailing Address  617 491-1809  Tel. No. (optional)
SUMMARY BALANCE INFORMATION:  Line 1: Ending balance from previous report  Line 2: Total receipts this period (page 2, line 11)  Line 3: Subtotal (line 1 plus line 2)  Line 4: Total expenditures this period (page 3, line 14)  Line 5: Ending balance (line 3 minus line 4)  Line 6: Total in-kind contributions this period (page 4)  Line 7: Total (all) outstanding liabilities (page 4)  Line 8: Name of bank(s) used Citizens Bank
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.  Signed under the penalties of perjury:  Treasurer's signature (in ink)
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate:	(check 1 box only)
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☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

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#### **SCHEDULE A: RECEIPTS**

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only Hemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date Received	Name and Residential Address (alphabetical listing required)	Amo	unt	Occupation & Employer (for contributions of \$200 or more)
	SEE ATTACHED			
	·			
Line 9: 7	Fotal receipts in excess of \$50 (or listed above)	975	00	
	Total receipts \$50 and under* (not listed above)	1.	00	
	TOTAL RECEIPTS IN THE PERIOD	A STATE OF THE PARTY OF THE PAR		Enter on page 1, line 2

Friends of Luc Schuster

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10/15	Dunal ale			
10/15 Bretholtz,		65 Antrim St.	\$200	Teacher, CPS
	Phyllis	Cambridge, MA 02139		
11/10	Catalano,	267 Grove St.	\$50	
	Adrian	Cambridge, MA 02138		
10/31	Crane, Kevin	27 Norris St.	\$100	
		Cambridge, MA 02140		
11/25	Foster, Lorn	886 Ottawa Dr,	\$100	
,———		Claremont, CA 91711		
10/18	Harter,	16 Arlington St.	\$50	
	Angelica	Cambridge, MA 02140		
10/24	Harvey, Jan	20 Haskell St.	\$50	
	7.2	Cambridge, MA 02140		
10/15	Hoefgen, Lynn	22 Haskell St.	\$100	
10,10		Cambridge, MA 02140		
11/7 Leslie, David	Leslie David	76 Garfield St. #3	\$75	
	Cambridge, MA 02138			
10/24	Lindenmulder,	74 Upland Rd.	\$50	1
10/2.	Bill	Cambridge, MA 02140		
11/3	Maher, John	8 Dunstable Rd.	\$100	
11/0	1,141101,001111	Cambridge, MA 02138		
10/27	Malenfant,	16 Harrison Ave.	\$50	
10/2/	Janet	Cambridge, MA 02140	1	
11/2	Schmitt, Mary	54 Creighton St. #2	\$50	No.
11,2	Jane	Cambridge, MA 02140		
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#### **SCHEDULE B: EXPENDITURES**

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amo	unt
·	SEE	ATTA CHE	$\bigcirc$		,
)			,		,
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			·		
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					7
		Line 12:	Expenditures over \$50	5010	53
			Expenditures \$50 and under*		20
	Enter on page 1, line 4	Line 14	:TOTAL EXPENDITURES	5833	8

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Date Paid	To Whom	Whom Address		Amount
10/31 Dial-A-Pizza		147 Beacon Street,	Campaign	\$124.35
		Somerville, MA 02143	Food	
10/19	Laurance	6 Mead St.	Staff	\$100
	Kimbrough	Cambridge, MA 02140		
10/23	Laurance	6 Mead St.	Staff	\$100
	Kimbrough	Cambridge, MA 02140		
11/1	Laurance	6 Mead St.	Staff	\$100
	Kimbrough	Cambridge, MA 02140		
11/10	Laurance	6 Mead St.	Staff	\$200
	Kimbrough	Cambridge, MA 02140		
11/9	Mark	141 Oxford St. #11	Staff	\$114.41
	Schuster	Cambridge, MA 02140		
10/24	Matt Nelson	65 Eustis St.	Staff	\$56
		Cambridge, MA 02140		
10/23	Matt Nelson	65 Eustis St.	Staff	\$51.76
		Cambridge, MA 02140		
11/7	Matt Nelson	65 Eustis St.	Staff	\$150
		Cambridge, MA 02140		
10/24	Melissa Data	22382 Avenida Empresa	Phone	\$150
	Corp.	Rancho Santa Margarita,	Service	
		CA_92688		
11/7	Melissa Data	22382 Avenida Empresa	Phone	\$150
	Corp.	Rancho Santa Margarita,	Shipment	
		CA, 92688		
10/26	Micro Center	730 Memorial Drive	Print	\$89.07
		Cambridge, 02139	Cartridges	
11/14	Peter Bent	14 Dopping Brook Rd.	Campaign	\$52.50
		Sherborn, MA 01770	Photos	
11/14	Piro Printers	483 Medford Street	Campaign	\$1278.90
		Somerville, Massachusetts	Lit.	
		02145	Printing	
11/9	The Druid	1357 Cambridge St.	Catered	\$380.00
		Cambridge, MA 02139	Party	
11/1	The Half	1760A Mass Ave.	Campaign	\$82.90
	Shell	Cambridge, MA 02140	Food	
11/8	The Half	1760A Mass Ave.	Campaign	\$86.75
	Shell Rest.	Cambridge, MA 02140	Food	
10/24	US Postal	Porter Square Post Office	Stamps	\$57.50
	Service	Cambridge, MA 02140		
11/3	US Postal	31 Milk St. Lobby	Mailing	\$1096.41
	Service	Boston, MA 02109		
10/26	US Postal	770 Mass Ave.	Stamps	\$600.00
10/20	Service	Cambridge, MA 02139	- minps	7000.00

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#### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
11/8/05	Common Place Members	141 Oxford St. Cambridge, MA 02140	Apartments to phone bank on election day	\$100
			<u>'</u>	
•				
		Line 15:	In-kind over \$50	\$100
		Line 16:	In-kind \$50 and under	-0-
	Enter on page 1, line 6	Line 17:	Total In-kind	#100

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

#### **SCHEDULE D: LIABILITIES**

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address Purpose	Amount
E	Enter on page 1, line 7	Line 18: OUTSTANDING LIABILITIES (ALL	) -0-



# Schedule E Schwiff Disclosure of Assets Statement Office of Campaign and Political Finance

Friends of

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of Massachusetts				
File with: Director				
Office of Campaign and Political Finance One Ashburton Place Boston, MA 02108 (617) 727-8352			CPF ID#	
This form should be filed by	all candidates	and committees with each	year end and each dis	solution report.
	,	Schuster	-	17. 14/
All ca	ındidates and co	ommittees must fill in pa	art A <u>or</u> part B.	
Part A:  No assets* were acquired or disp	posed of by this	candidate/committee dur	ing the period covered	by this statement.
Part B: <u>Assets acquired:</u> List all assets acquired have filed, list all assets.	nired since the co	ommittee last filed this sta	atement. If this is the fi	rst Schedule E you
Asset Include year, model or other identifying information, if applicable.	Date Acquired	Present Location	Manner Acquired	Cost/Value
Assets disposed of: List all assets so	old traded or tra	nsferred during the repor	ting period covered by	this statement.
Asset Include year, model or other identifying information, if applicable.	Date Acquired	Disposition to: Name and Address	Date and Manner of Disposition	Disposition Value Attach statement of how value is determined.
			~ ·	

Assets acquired by a political committee must be used for the political purpose for which the committee is organized and must remain the property of that committee. Assets may be disposed of at any time, but must be disposed of prior to dissolution.

\*An asset is defined as any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at the time of acquisition.

Signed under the penalties of perjury:

Treasurer signature

Signed under the penalties of perjury:

Date

Candidate signature